

11/27/01
JC682 U.S. PTO

11-30-01

PTO/SB/05 (1/98)

Approved for use through 9/30/00, OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCEPlease type a plus sign (+) inside this box

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket 6974-4

First Inventor DURAN, et al.

Title Method of Profiling Talent in a Multimedia Format

Express Mail Label No. EL 740159655 US

APPLICATION ELEMENTS
 See MPEP Chapter 600 concerning utility patent application contents.

ADDRESS TO: Commissioner for Patents
 Box Patent Application
 Washington, DC 20231

1. <input checked="" type="checkbox"/> Fee transmittal Form (Submit an original and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (<i>Appendix</i>)
2. <input checked="" type="checkbox"/> Specification [Total <i>(preferred arrangement set forth below)</i> 19]	7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
<ul style="list-style-type: none"> - Descriptive title of the invention - Statement Regarding Fed Sponsored R&D - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 	
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 4]	8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documents)
4. Oath or Declaration [Total Pages 4]	9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (where there is an assignee)
a. <input checked="" type="checkbox"/> Newly signed or executed	10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>
b. <input type="checkbox"/> Copy from prior Application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)	11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS [Note Box 5 below] Citations
<i>[Note Box 5 below]</i> i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> inventor(s) named in prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference herein.	12. <input type="checkbox"/> Preliminary Amendment
	13. <input checked="" type="checkbox"/> 2 Return receipt postcards (MPEP 503) <i>(Should be specifically itemized)</i>
	14. <input checked="" type="checkbox"/> Applicant claims small entity status
	15. <input type="checkbox"/> Certified copy of priority Document(s) <i>(if foreign priority is claimed)</i>
	16. <input type="checkbox"/> Other: Fee: \$ 452.00

 * A newstatement is required to pay small entity fees, except where
 one has been filed in a prior application and is being relied upon

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

 Continuation Divisional Continuation-in-part (CIP) of prior application no. / _____

Prior application information: Examiner: _____ Group/Art Unit: _____

18. CORRESPONDENCE ADDRESS

 Customer Number or Bar Code Label Correspondence address below
Insert Customer No. or Attach bar code label

NAME	Joseph W. Bain, Esq.			
ADDRESS	Akerman, Senterfitt & Eidson, P.A. Post Office Box 3188			
CITY	West Palm Beach	STATE	FL	ZIP CODE
COUNTRY	USA	TELEPHONE	561/653-5000	FAX
				33402-3188
				561/653-5333

Name	Pablo Meles	Registration No.	33,739
Signature	<i>Pablo Meles</i>	Date	Nov. 27, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

JC682 U.S. PTO
09/996182

11/27/01

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$ 452.00)

Complete if Known

Application Number	
Filing Date	
First Named Inventor	DURAN, et al.
Examiner Name	
Group Art Unit	
Attorney Docket No.	6974-4

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	50-0951
Deposit Account Name	Akerman Senterfitt

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	740	201 370 Utility filing fee	370
106	330	206 165 Design filing fee	
107	510	207 255 Plant filing fee	
108	740	208 370 Reissue filing fee	
114	160	214 80 Provisional filing fee	

SUBTOTAL (1) (\$ 370)

2. EXTRA CLAIM FEES

Total Claims	-20** =	0	X	9	=	0	Extra Claims	Fee from below	Fee Paid
Independent Claims	- 3** =	1	X	42	=	42			
Multiple Dependent									

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	84	202 42 Independent claims in excess of 3
104	280	204 140 Multiple dependent claim, if not paid
109	84	209 42 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 42)

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 65 Surcharge - late filing fee or oath	
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
139	130	139 130 Non-English specification	
147	2,520	147 2,520 For filing a request for ex parte reexamination	
112	920*	112 920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
115	110	215 55 Extension for reply within first month	
116	400	216 200 Extension for reply within second month	
117	920	217 460 Extension for reply within third month	
118	1,440	218 720 Extension for reply within fourth month	
128	1,960	228 980 Extension for reply within fifth month	
119	320	219 160 Notice of Appeal	
120	320	220 160 Filing a brief in support of an appeal	
121	280	221 140 Request for oral hearing	
138	1,510	138 1,510 Petition to institute a public use proceeding	
140	110	240 55 Petition to revive - unavoidable	
141	1,280	241 640 Petition to revive - unintentional	
142	1,280	242 640 Utility issue fee (or reissue)	
143	460	243 230 Design issue fee	
144	620	244 310 Plant issue fee	
122	130	122 130 Petitions to the Commissioner	
123	50	123 50 Processing fee under 37 CFR 1.17(q)	
126	180	126 180 Submission of Information Disclosure Stmt	
581	40	581 40 Recording each patent assignment per property (times number of properties)	40
146	740	246 370 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249 370 For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279 370 Request for Continued Examination (RCE)	
169	900	169 900 Request for expedited examination of a design application	
Other fee (specify) _____			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	PABLO MELES	Registration No. (Attorney/Agent)	33,739	Telephone	561 653 5000
Signature	<i>Pablo Meles</i>			Date	Nov. 27, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231